

VILLAGE OF MILLERSBURG
APPLICATION FOR SIGN PERMIT

SIGN PERMIT # _____

APPLICANT'S NAME: _____ PHONE #: _____

APPLICANT'S ADDRESS: _____

OWNER'S NAME & ADDRESS _____
(Sign application should be made by the owner of the property or his agent.)

SIGN ERECTOR'S NAME: _____

SIGN ERECTOR'S ADDRESS: _____ PHONE #: _____

ADDRESS OF PROPOSED SIGN: _____

ZONING DISTRICT: _____

A DRAWING MUST BE ATTACHED CONTAINING AT A MINIMUM, THE FOLLOWING INFORMATION:

1. The width of the building face or faces that abut the streets and the width of the lot not occupied by a building.
2. The design and layout of the proposed sign, including the total area if the sign and the size, height, character, materials and color of letters, lines, and symbols. (If more than one sign is proposed, separate information on each face shall be provided.)
3. The exact location of the sign in relation to the building and the property.
4. A scaled plot plan must be included with application.
5. An inventory of existing signs on the property, complete with sizes, types, & descriptions.

SIGN INFORMATION:

SIGN # ONE:
SIDE ONE - SIZE: _____ FT. X _____ FT. = _____ SQ. FT.

SIDE TWO - SIZE: _____ FT. X _____ FT. = _____ SQ. FT.

SIGN # TWO:
SIDE ONE - SIZE: _____ FT X _____ FT. = _____ SQ. FT.

SIDE TWO - SIZE: _____ FT X _____ FT. = _____ SQ. ST.

TOTAL SQUARE FOOTAGE OF SIGNAGE REQUESTED: _____ SQ. FT.

IF NECESSARY ATTACH A SEPARATE SHEET INDICATING ANY ADDITIONAL SIGNAGE REQUESTED.

SIGN TYPE:

WALL _____ FREESTANDING _____ WINDOW _____ PROJECTING _____ AWNING _____

METHOD OF SUPPORT: _____ WEIGHT: _____ LBS.

ILLUMINATED: YES _____ NO _____ FLASHING: YES _____ NO _____

MOVING PARTS: YES _____ NO _____ SETBACK FROM RIGHT-OF-WAY LINE: _____ FT.

FRONT FOOTAGE OF BUILDING: _____ FT.

ADDITIONAL INFORMATION: _____

DATE: _____ SIGNATURE OF APPLICANT: _____

\$ 20.00 per sign

SIGN PERMIT APPROVAL/DENIAL

DATE: _____ THE ABOVE PERMIT IS HEREBY: APPROVED _____ DENIED _____

COMMENTS: _____

DATE: _____ SIGNATURE: _____
ZONING INSPECTOR

FEE PAID: \$ _____ RECEIVED BY: _____ DATE: _____